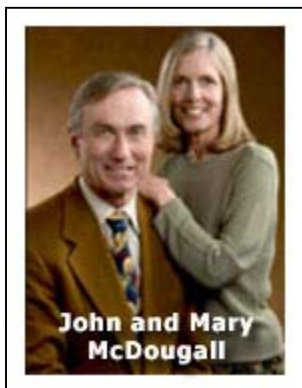


The McDougall Newsletter

Volume 5 Issue 4



**John and Mary
McDougall**

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Securing Respectful Medical Care

Disrespect shown by doctors towards patients is a major reason for unhappiness with present day healthcare. You are the customer buying professional services and advice, and you ought to be treated with importance. As a satisfied customer, leaving your doctor-patient visit you should, by all rights, be feeling better than before you went in—healthier, happier, and more hopeful. Has this been your experience? If not, then why not?

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Non-stick Pots and Pans: Are They Safe?

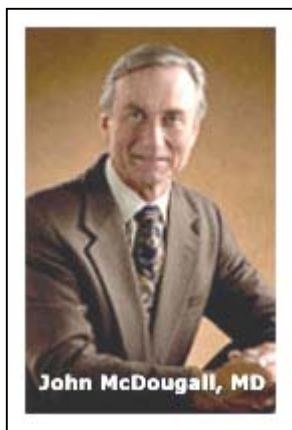
During my 35 years of medical practice I have never seen, or even heard of, anyone becoming sick or dying from exposure to the components of the non-stick surfaces of pots and pans. However, I have seen thousands, and heard of hundreds of millions, of people made sick by eating grease. The purpose of non-stick pans is to cut out the vegetable oils and animal fats used in cooking and help prevent "*lipotoxemia*"—that is, poisoning from lipids (fats). The most common diseases occurring from chronic fat poisoning are obesity, heart disease, cancer of the breast, colon, and prostate, and type-2 diabetes. Use of non-stick pans also eliminates the risk of common stovetop grease fires.

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A doctor's primary, if not the sole, duty is to improve people's lives. Physicians are rigorously trained for 7 to 12 years to become experts on the mental, emotional and physical complexities of the human being. These professionals are supposed to be the authorities on the healing arts. Every encounter should leave you with an enhanced state of well-being.

Unfortunately, too often patients leave their 7-minute office visit feeling dissatisfied, frightened, angry, saddened, hopeless, rushed and out of control. Something is seriously wrong and it is not the patient's fault, nor is it the patient's obligation to remedy this dysfunctional relationship.

The medical profession needs to fix itself; but it won't, because there is little motivation for change—since almost all doctors are very busy, making buckets of money under the present system.

Because of their pivotal position in all medical decisions these professionals have the potential to do you great good—as well as great harm. Let me offer you these suggestions for getting the due respect and the very high quality care you deserve when you must visit a doctor. (In my October 2005 newsletter, I discussed how to find the right doctor.)

Make an Agenda

Prepare for your next doctor's appointment as you would for an important business meeting—your life could depend on it. You would never hold a conference without a written agenda of the matters to be discussed. Your doctor's appointment requires the same diligent document preparation.

The agenda serves many purposes:



- ✓ It will remind you of all important items. Write down the most important topics and questions first.
- ✓ Having a list of questions shows your doctor that you value this appointment time enough to come prepared.
- ✓ Because it is written down, each and every item on the agenda must be addressed; this provides you with a great deal of control over the course of the meeting.
- ✓ Because every item on your list obviously must be covered, the agenda prevents you from being rushed. However, if inadequate time has been set aside to discuss all of your items, then just make another, longer
- ✓ This agenda facilitates communications. For example, people who are easily intimidated by their doctor can simply hand over the list and ask that each item be addressed. No spoken words are necessary.

Take the Lead in the Conversation

Most of the time, the diagnosis of your problem is based upon the story you tell the doctor. Seldom does the physical examination and subsequent laboratory or imaging tests make the diagnosis. Therefore you must communicate effectively to get the best care possible. Talk freely to the doctor about how you feel. Don't wait to be asked! Don't be embarrassed.

- ✓ Write down details of the recent changes (signs and symptoms) and relevant events that caused you to make this appointment. Separate this relevant, recent history from items of the distant past.
- ✓ Bring a "health history" list with you. Make it concise. A bullet point list with dates is easy for the doctor to read. Include your past illnesses, hospitalizations, major accidents, and family history.
- ✓ Have copies of reports from other doctors or hospitalizations that are pertinent to this visit. Include all important x-rays and other laboratory tests.
- ✓ Bring your bag of pills—including all your herbal tonics, natural remedies, and supplements. If you don't have the original pill bottles, then be sure to have the correct medication names written down and their correct dosage.
- ✓ Make a list of all medication allergies and any other foods and substances to which you have reacted adversely.

Finally—and after the doctor has had a chance to give you his or her opinion—don't hesitate to tell the doctor exactly what you think about your problem. After all, no one knows you better than you do—you are the expert on you. Tell the doctor what you have concluded—your diagnosis—based on living with your troubles. Explain, also any fears you may have about your condition—that you might have cancer, heart disease, diabetes, etc. Your insights will be crucial to resolving your health problems.

Research before the Meeting

The better prepared you are when you arrive at your office visit the more effectively your time will be spent. Investigate any topics that should be discussed, like choice of treatment for diabetes, high blood pressure, coronary artery disease, etc. The Internet is your ideal research tool. General search engines like Google or Yahoo are invaluable. You will find most of what you read to be of value, and you should be able to easily sort out the nonsense. My favorite medical research site is the National Library of Medicine at www.nlm.nih.gov. Enter your questions using "and" – for example: diabetes *and* treatment *and* diet. This is a free site.

Are You Really Going Alone?

A new car salesman once told me that a man alone on the showroom floor was an easy "mark." However, when his wife was along the sale could take him all afternoon, and the customers always got a better deal when they worked together. Having someone—a spouse, parent, child, friend—accompany you to the doctor's office puts you at an advantage. You have changed the balance of communication—now it's two against one; and you have created a more even exchange with the "all-knowledgeable doctor." Your companion will be able to ask additional questions, and hear and remember important bits of information that you might miss. Plus the emotional support is invaluable. When there are important decisions to be made, such as a life-time of medication or a possible surgery, then take along your support.

Demand Respect for Your Time

Maybe they call it the "patient's waiting room," because you are expected to wait—patiently? Long delays before seeing the doctor are so common that bringing a book to an appointment is routine. A reasonable delay may be 15 minutes—any longer than that sends a clear message that your time is of little value. Occasionally an emergency for the doctor can happen; but routine hour-long waits are a clear case of poor business practice—and you should not tolerate it. This frustrating beginning spoils the chances for you to get the excellent care you deserve—an hour spent fuming in the waiting room will, for one thing, raise your blood pressure sky-high.

I have found several reasons for this disrespectful business practice. Offices overbook, maybe anticipating a cancellation, so the doctor is always busy. It is also an "ego thing" for the doctor to have lots of people waiting just to see him or her. One office nurse told me that her boss would peek into the waiting room upon arrival each morning. If the room wasn't packed he sulked all day long. However, I believe this practice continues mostly because it

is tradition and few people have complained loudly enough to make any change. In truth, respect in most offices is limited to a demand for respect for *the doctor's authority*. It is time for you to speak up.

Explain to the people at the reception desk that your time is valuable and you do not want to be kept waiting. Call before your appointment and ask if you will be seen on time—or sarcastically ask, “How far is the doctor behind today?” When it seems that you will have to wait, offer your cell phone number and ask to be called with an updated time for the appointment. You might also try for the first appointment in the morning or after lunch.

Proper Office Behavior

Your initial visit with the doctor should be to gather information. Ask lots of questions. If you don't ask then the doctor may think you understand everything. Pictures drawn by the doctor may help explanations. You should be taking notes. Ask the doctor to write down any specific instructions you need. Some doctors won't mind if you make a tape recording of the visit—but ask first. Before leaving ask for any instructional materials (video tapes, brochures, etc.), especially research papers that are available.

By the end of the visit you should have a clear idea of the doctor's investigation and treatment plans including any tests, specialists, and follow-up appointments that need to be made. If after you leave, things become unclear or other problems develop, then you should feel welcome to call or e-mail the office and communicate with the doctor and/or a staff member for more information.

Questions to Ask Your Well-Paid Expert

Start asking questions while in the office—even if you know nothing about the condition that you have just been told about. Ask:

What's the cause? (How did I get this?)

How will this condition affect my life?

How will my condition affect others?

Do you have a cure?

How long must I take this treatment?

If you had my condition what would you be asking right now, Doctor?

If you had this condition who would you go to for care? I can afford to travel anywhere.

Are there doctors holding opinions that disagree with your approach?

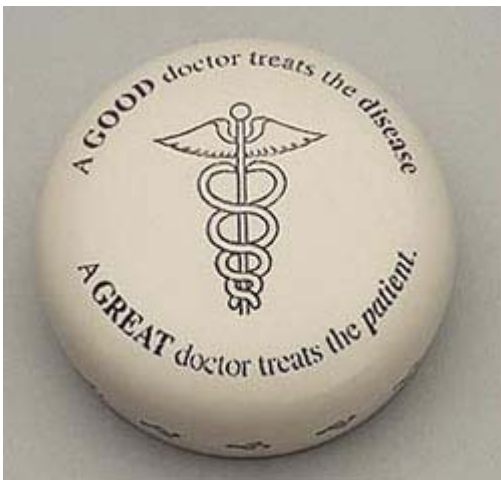
Do you have anything I can read? Any scientific reference papers?

Do you have other patients who have similar problems that I can talk to?

Do you have any patients that you have treated who would share their experiences with me?

Does diet and lifestyle have anything to do with this problem?

Don't Be Sold on Your First Visit



Most salespersons know this cardinal rule: If they fail to sell the customer on the first contact then they have less than a 10% chance of ever making the sale. After one high blood pressure reading they are placed on a lifetime of medication. They agree to schedule surgery for the next available opening without a pause for thought. No!

Get off the showroom floor—out of the doctor's office—and give yourself some time to think, and do some research, before you buy—just as you would if you were buying a TV or a washing machine. Your health-care purchase deserves more consideration than household appliances.

While sitting in the waiting room you should practice an exercise of saying “No”—maybe 1000 times—so the word easily rolls off your lips when the doctor dictates what treatments you must follow and what drugs you must take.

Evaluate Your Doctor's Visit

Was the office staff helpful, friendly, and courteous?

Did you like and have feelings of trust for the doctor?

Did you feel better after the visit than before?

How long did you wait before you were seen?

Was everyone respectful?

Were you comfortable talking to the doctor?

Did the doctor ask you questions and listen to your answers and seem interested?

Did you get all your questions answered?

Did you understand the doctor's explanations?

Did you feel rushed?

Was your privacy valued?

Did the doctor answer you with a prescription pad in hand?

Were pills (or surgery) the only solution offered?

Were the side effects of any proposed treatments explained?

Were any alternative solutions offered?

Did the doctor give you the option of no treatment?

Were you given scientific support for any recommendations?

Were suggestions made to help and encourage you to prevent illnesses—did the doctor talk about your weight, your exercise and your bad habits?

Did the doctor suggest curing your problems by changing to a low-fat (McDougall-type) diet and moderate exercise?

If you are satisfied with the experience you had with the doctor and staff, GREAT! Tell your friends. If your visit was not pleasing, remember, the choice is yours—you are the customer—try another doctor.



Non-stick Pots and Pans: Are They Safe?

During my 35 years of medical practice I have never seen, or even heard of, anyone becoming sick or dying from exposure to the components of the non-stick surfaces of pots and pans. However, I have seen thousands, and heard of hundreds of millions, of people made sick by eating grease. The purpose of non-stick pans is to cut out the vegetable oils and animal fats used in cooking and help prevent "*lipotoxemia*"—that is, poisoning from lipids (fats). The most common diseases occurring from chronic fat poisoning are obesity, heart disease, cancer of the breast, colon, and prostate, and type-2 diabetes. Use of non-stick pans also eliminates the risk of common stovetop grease fires.

Although nonstick has revolutionized America's cooking habits over the past fifty years, this article should not be interpreted as an unqualified defense for the potentially toxic materials used in non-stick pans, but rather as an attempt to put the issues into perspective.

PFOA Concerns

The chemicals of most concern are from a family called perfluorooctanoic acid (PFOA). These are found in the blood of more than 95% of Americans and have been tied to cancer and developmental damage in animal studies. The EPA has asked eight manufacturers that use PFOA to reduce production by 95% by 2010 and to stop using it altogether by 2015. PFOA is used in many household products, including cookware, carpets (Stainmaster carpet treatment), draperies, pil-

lows, adhesive tape, clothing, and food packaging (from microwave popcorn bags to pizza box liners). Cookware is only a very small fraction of our daily exposure. **DuPont—the Center of Controversy**



Teflon® branded non-stick coatings are made solely by DuPont. According to DuPont's web site, significant decomposition of the coatings occurs only when temperatures exceed about 660°F (349°C)—well above the smoke point for cooking oil, fats or butter. However, these high temperatures can be reached if dry or empty cookware is neglected on a hot burner or in an oven. PFOA materials released at high temperatures have been known to kill caged pet birds.

Not surprisingly, a recent study supported by DuPont concluded, "...exposures to PFOA during consumer use of the articles evaluated in this study are not expected to cause adverse human health effects in infants, children, adolescents, adult residents, or professionals nor result in quantifiable levels of PFOA in human serum."¹ However, this same company agreed in December 2005 to pay \$10.25 million in fines and \$6.25 million for research and education to resolve federal charges that it hid information about the dangers posed by PFOA.

Another independent study researched the effects of heating non-stick pans to 320°C and found that PFOA was not generated from the pans by heating.² They reported that paper treated with PFOA resulted in the largest potential for exposure for people. For example, the amount of toxic materials released from popcorn bags was found to be

hundreds of times greater than from the first use of non-stick cookware heated to 175°C. With repeated use of the cookware the amount of PFOA released approaches zero.

Inert Cooking Surfaces are Safest

About 15 years ago manufacturing processes for making non-stick pots and pans improved dramatically—with the use of powders made out of ceramic, stainless steel or titanium. The coatings were also applied much more thickly to better quality aluminum pans.

- Coatings are known by their brand names and a few examples are: Teflon®, Xylan®, Excalibur®, Ultralon®, and Silverstone.
- There are too many manufacturers of high quality non-stick pans to list, but popular ones are: All-Clad, Anolon,

Drawbacks of Other Cooking Surfaces

- **We have always recommended that aluminum not contact your food because of the causal relationship with Alzheimer's disease.**
- **Plastics should never be used for heating because of the release of polyvinyl chloride, polycarbonate, and plasticizers—chemicals that have been tied to birth defects, cancer or fertility problems.**
- **Iron from pots and pans increases the oxidant load in the body, which is tied to artery damage and heart attacks.**
- **Stainless steel releases iron, nickel and chromium, which have potential toxic effects.**
- **Copper and iron overdoses can damage body organs, including the liver.**

Berndes, Calphalon Circulon, Cuisinart, Emerilware, Farberware, Revere, Scanpan, T-Fal, Viking, and WearEver.

Because of the low risk of harm from the minerals released we still recommend the use of iron, stainless steel and copper cookware. The more inert the cooking surface the better—ceramic, enamel, and glass cookware presently best fit this criteria. Wood (bamboo) for steaming is also very safe. We also use inert silicone-based products (SiliconeZone) for baking.

My conclusion is that high-quality, non-stick pots and pans present very inert surfaces unless they are misused—specifically by overheating which causes the release of toxic fumes (chips from the surface are inert and inconsequential if swallowed). Look at the surfaces of your pots and pans to be sure they are in good condition and covering the aluminum bases. Unless future evidence of actual harmful effects from using PFOA-based non-stick cookware becomes available, I will continue to recommend their use, because presently the real-life advantages outweigh their theoretical risks.

References:

- 1) [Washburn ST](#), [Bingman TS](#), [Braithwaite SK](#), [Buck RC](#), [Buxton LW](#), [Clewell HJ](#), [Haroun LA](#), [Kester JE](#), [Rickard RW](#), [Shipp AM](#). Exposure assessment and risk characterization for perfluorooctanoate in selected consumer articles. *Environ Sci Technol*. 2005 Jun 1;39(11):3904-10.
- 2) [Begley TH](#), [White K](#), [Honigfort P](#), [Twaroski ML](#), [Neches R](#), [Walker RA](#). Perfluorochemicals: potential sources of and mi-

gration from food packaging. *Food Addit Contam.* 2005 Oct;22(10):1023-31.



Featured Recipes

BLUEBERRY MUFFINS

Make these in the silicone muffin pans and just pop them out when they are done!

Preparation Time: 20 minutes

Cooking Time: 25 minutes

Servings: 12

1 cup whole wheat pastry flour

1 cup white whole wheat flour

2 teaspoons baking powder

1/8 teaspoon sea salt

1/2 cup unsweetened applesauce

1/2 cup agave nectar

1/2 cup soy or rice milk

1 teaspoon vanilla

1 teaspoon lemon juice

1 tablespoon egg replacer mixed in 1/4 cup warm water

1 cup blueberries

Preheat oven to 350 degrees.

Mix dry ingredients together in a large bowl. Combine wet ingredients together in another bowl. Pour the wet ingredients over the dry and mix lightly. Gently fold in the berries, mixing as little as possible. Overmixing makes the muffins tough.

Bake in non-stick muffin pans until lightly browned, about 25 minutes.

Hints: If you can't find white whole wheat flour in your markets, use all whole wheat pastry flour. Honey may be substituted for the agave nectar, if desired. To use frozen blueberries in this recipe, thaw first, then toss gently with a tablespoon of flour (this helps keep the berries whole).

BREAKFAST PIZZAS

By Alex Bury, McDougall Program cooking instructor

These are a special treat for a weekend breakfast.

Preparation Time: 30 minutes

Cooking Time: 20 minutes

Servings: 8

1 large Yukon Gold potato, boiled until almost done, and diced

1/2 cup onion, chopped

2 garlic cloves, finely chopped

2 cups chopped vegetables: mushrooms, zucchini, broccoli, etc

1 box Mori-Nu silken tofu, crumbled

3 tablespoons scramble seasoning mix (recipe included below)

1 package fresh corn tortillas

1 15 ounce can fat-free refried beans

1 jar fat-free salsa

grated Follow Your Heart vegan cheese, cheddar (optional)

Preheat oven to 400 degrees.

Place ½ cup of water in a big sauté pan or sauce pot. Add the potato, onion and garlic and cook for 5 minutes. Add a bit more water or stock if necessary to keep from sticking. Add the vegetables and cook for 3 minutes, stirring occasionally. Add the tofu and the seasoning mix. Stir everything very well and cook for 3 minutes. Remove from heat and set aside.

Spread a layer of beans on the tortillas. Place the tortillas on baking sheets. Top each tortilla with a layer of the tofu scramble, and sprinkle with some grated Follow Your Heart cheese if desired. Bake at 400 degrees for 10 minutes, until the topping is golden brown.

Remove from oven, spoon some salsa over each breakfast pizza and enjoy!

SCRAMBLE SEASONING MIX

Make a big batch and keep in your cupboard—also makes a great tofu egg salad sandwich seasoning, or better yet, add it to pureed, cooked white beans for a super low-fat (but filling) “egg salad!”

2 2/3 cups nutritional yeast
 2 tablespoons onion powder
 2 tablespoons paprika
 1 teaspoon celery seed
 1 tablespoon turmeric
 1 tablespoon salt
 1 teaspoon pepper

Mix and store in a sealed container. Keeps indefinitely.

BAKED OATMEAL CASSEROLE

By Alex Bury, McDougall Program cooking instructor

This is a great recipe to make the night before, then just heat in the oven for a rich and hearty breakfast.

Preparation Time: 10 minutes

Cooking time: 15 minutes

Servings: 4-6

Oatmeal:

1 cup oatmeal
 1 cup rice milk or soy milk
 1 cup water
 2 tablespoons maple syrup or agave
 ¼ cup chopped walnuts (optional)
 ¼ cup dried cranberries, currants or chopped dried apricots

Topping

½ box of your favorite oil-free, healthy, whole-grain cereal, crushed

Sauce:

3 ripe bananas
 1 cup crushed pineapple
 1 teaspoon cinnamon
 ½ cup orange juice or apple juice
 ½ cup blueberries

Combine all the oatmeal ingredients in a sauce pot and simmer, on low heat, until done, about 6 minutes. Pour into a

casserole dish and top with the crushed cereal. Cover and refrigerate until morning.

Preheat oven to 350 degrees.

Bake at 350 degrees for 15 minutes, until the cereal is just starting to turn brown.

While the casserole is baking, make the sauce. Combine all sauce ingredients in a blender and process until smooth. Serve the sauce over the hot oatmeal casserole. (The sauce may be heated if you prefer.)

QUICK MEXICAN CHILI

This is a fast and easy meal, delicious served with corn tortillas, over rice, or scooped on top of baked potatoes. The variations suggested in the hints can make this recipe seem completely different each time you serve it.

Preparation Time: 5 minutes

Cooking Time: 25 minutes

Servings: 4

1 onion, chopped
¼ cup water
2 14.5 ounce cans chopped tomatoes
1 15 ounce can kidney beans, drained and rinsed
1 15 ounce can pinto beans, drained and rinsed
½ cup salsa (mild, medium or hot)
2 teaspoons oregano
¼ teaspoon chipotle powder
¼ cup chopped fresh cilantro
½ cup chopped avocado (optional)
¼ cup chopped onions (optional)
½ cup tofu sour cream (optional)

Place the onion and water in a medium pot. Cook and stir over medium heat until onion has softened, about 5 minutes. Add tomatoes, beans, salsa, oregano & chipotle powder. Bring to a boil, reduce heat, cover and cook for another 20 minutes. Serve topped with fresh cilantro and optional avocado, onions, and/or tofu sour cream.

Hints: Black beans may be substituted for either of the beans suggested, or use black beans along with the other beans. Use fire-roasted tomatoes or chopped tomatoes with green chilies for a bit more flavor. Try this with green salsa instead of red salsa. Add more chipotle powder for a bit more heat. This recipe is very easy to add to in order to make a larger batch. Add a few extra cans of beans and a can of fire-roasted crushed tomatoes, a bit more of the salsa and seasonings and you'll have enough for 6-8 servings or some extra to put in for freezer.

TOFU TACOS

This recipe appeared in the newsletter several years ago as part of another recipe. I make this part of the recipe for my family and it is always a favorite, so I thought it was a good idea to run this recipe again on its own merit-just in case you haven't tried it.

Preparation Time: 30 minutes

Cooking Time: 10 minutes

Servings: 6-8

Spicy Tofu:

24 ounces firm tofu (not silken)
4 tablespoons soy sauce
2 tablespoons lime juice
2 tablespoons chili powder
2 teaspoons ground cumin
2 teaspoons garlic powder

½ teaspoon cayenne

Drain tofu in a colander and press out excess water with paper towels. Cut into ½ inch cubes. Combine soy sauce, lime juice, chili powder, cumin, garlic powder, and cayenne in a large bowl. Add tofu and mix gently. Let stand for 10 minutes, stirring occasionally. Place a large non-stick frying pan on medium heat. Add tofu and cook turning occasionally for about 10 minutes. Set aside.

Cabbage:

4 cups finely shredded cabbage

3 tablespoons seasoned rice vinegar

½ tablespoon lime juice

Combine all ingredients in a bowl and set aside.

Corn Tortillas

Soften individually on a dry non-stick griddle, or wrap in a towel and heat in the microwave.

To assemble:

Take a soft corn tortilla, spoon tofu and cabbage down the center, add a bit of aioli and some hot sauce, if desired, roll up and eat with your fingers.

CILANTRO-GARLIC AIOLI

Preparation Time: 5 minutes

Servings: Makes 1 ½ cups

1 ½ cups tofu sour cream

2 large cloves garlic, peeled and coarsely chopped

juice of 1 lime

1/3 cup cilantro leaves

dash salt

Place all ingredients in a food processor and process until smooth.

Hint: Will keep in refrigerator for about 2 weeks.